

JONATHAN E. FIELDING, M.D., M.P.H. Director and Health Officer

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September 5, 2012

TO:

Each Supervisor

FROM:

Jonathan E. Fielding, M.D., M.P.H. Kkilding M.

Director and Health Officer

SUBJECT:

NOTIFICATION OF INTENT TO REQUEST DELEGATED AUTHORITY TO

APPROVE INCREASES OR DECREASES OF GREATER THAN 10 PERCENT

OF THE TOTAL CONTRACT AMOUNT

This is to notify you that I intend to request delegated authority to execute amendments to the agreements with AIDS Healthcare Foundation, Inc. (AHF) and the Los Angeles Gay and Lesbian Community Service Center (LAGLC) for HIV/STD services with a provision to increase or a decrease in funding up to 25 percent above or below each term's annual base maximum obligation. In accordance with Board of Supervisors' Policy 5.120, prior Board notice is required for any department requesting delegated authority to increase Board-approved contracts by over 10 percent.

## BACKGROUND

The forthcoming Department of Public Health (DPH) Board letter includes the recommendation to extend and increase funding to agreements with AHF and LAGLC HIV/STD to provide screening, treatment, case finding and educational services. The total program cost is \$1,808,506, effective upon Board approval through June 30, 2015, 100 percent off-set by net County cost (NCC) and Centers for Disease Control and Prevention (CDC) funds.

On May 16, 2005, DPH released a Request for Proposals (RFP) seeking qualified community-based organizations within the county to provide HIV/STD screening, treatment, case finding and education services that target and serve specific high-risk populations of men who have sex with men (MSM) and men who have sex with men and women (MSM/W). The RFP was sent to approximately 137 agencies. DHP received two proposals: one from AHF and one from LAGLC. On September 27, 2005, DPH notified your Board that both agencies were being selected for funding.



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Each Supervisor September 5, 2012 Page 2

On October 16, 2007, the Board approved amendments to both the LAGLC and AHF agreements to add the Community Embedded Disease Intervention Specialists (CEDIS) component. The last Board-approved action on June 7, 2011, extended these agreements through June 30, 2013 with the standard 10 percent delegated authority provision to increase or decrease funding.

## JUSTIFICATION

The AHF and GLC agreements are key components of HIV and STD integration among the MSM and MSM/W population. The CEDIS model has been proven to substantially increase the number of index patients and partners referred to this service, thereby increasing the number of individuals identified who are unaware of their HIV status. Therefore, in certain instances, DPH may find a need to increase contract activities such as adding another CEDIS in response to high numbers of disease cases identified who need contact investigation. The current 10 percent limitation, for this example would not allow the addition of a CEDIS because the position cost exceeds the 10 percent of the annual contract amount. An exception to the 10 percent limitation would allow for rapid expansion if needed.

## NOTIFICATION TIMELINE

Consistent with the procedures of Board Policy 5.120, we are informing your Board of our intent to proceed with the filing of the Board letter with the Executive Office of the Board for the November 13, 2012 Board Meeting.

If you have any questions or need additional information, please let me know.

JEF:mmc

c: Chief Executive Officer
County Counsel
Executive Officer, Board of Supervisors